

THE CLEVELAND MUSEUM OF ART
QUESTIONNAIRE

Dear *Mr. Dreyfuss*:

We are trying to build a biographical record of Cleveland Artists for reference. May we enlist your assistance with the following data?

FULL NAME: *Michael Dreyfuss* MEDIA: *Photography*

DATE AND PLACE OF BIRTH: *August 20, 1934* *Cologne, Germany*

ART TRAINING - Schools, Scholarships, etc:

None

EXHIBITIONS IN WHICH YOUR WORK HAS BEEN SHOWN:

May Show 1965

COLLECTIONS WHICH NOW INCLUDE YOUR WORK:

None

AWARDS:

None

PRESENT POSITION:

*Fellow in Anatomy (M.D.), School of Medicine,
Western Reserve University*

We would greatly appreciate it if you would inform us of subsequent awards, purchases, exhibitions and scholarships. Thankyou for your cooperation.

Ann L. Lucie
Assistant Curator of Paintings

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